

10/11/01

J1129 U.S. PTO

J1046 U.S. PTO

09/973750



10/11/01

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL***(For new nonprovisional applications under 37 CFR 1.53(b))*

Attorney Docket No. 9576-001-27

First Inventor or Application Identifier Michael FERGUSON

Title POULTRY LITTER FERTILIZER

**APPLICATION ELEMENTS**  
*See MPEP chapter 600 concerning utility patent application contents***ADDRESS TO:** Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g. PTO/SB/17)  
(Submit an original and a duplicate for fee processing)  
☒ Applicant claims small entity status.
2. ☒ Specification Total Pages **11**
3. ☒ Drawing(s) (35 U.S.C. 113) Total Sheets **2**
4. ☒ Oath or Declaration Total Pages **2**
- a. ☒ Newly executed (original)
- b. ☐ Copy from a prior application (37 C.F.R. §1.63(d))  
(for continuation/divisional with box 16 completed)
5. ☐ Incorporation By Reference (usable if box 4B is checked)  
The entire disclosure of the prior application, from which a copy of the  
oath or declaration is supplied under Box 4B, is considered to be part  
of the disclosure of the accompanying application and is hereby  
incorporated by reference therein.

**ACCOMPANYING DOCUMENTS**

6. ☒ Assignment Papers (cover sheet & document(s)) ✓
7. ☐ 37 C.F.R. §3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
8. ☐ English Translation Document (if applicable)
9. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
10. ☐ Preliminary Amendment
11. ☒ White Advance Serial No. Postcard
12. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
13. ☐ Request for Priority
14. ☐ List of Inventors' Names and Addresses
15. ☐ Other:

**16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:**

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application no.:  
Prior application information: Examiner: Group Art Unit:

**17. Amend the specification by inserting before the first line the sentence:**

☐ This application is a ☐ Continuation ☐ Division ☐ Continuation-in-part (CIP)  
of application Serial No. Filed on

☐ This application claims priority of provisional application Serial No. Filed

**18. CORRESPONDENCE ADDRESS**

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Name	Steven B. Kelber	Registration No.	30,073
Signature		Date	October 11, 2001
Name	Kenneth K.D. Vu	Registration No.	46,323
		Telephone	202-861-3900

# FEE TRANSMITTAL

Docket No. 9576-001-27  
 Serial No.  
 Filing Date HEREWITH  
 Inventor(s) Michael FERGUSON  
 Group Art Unit

TOTAL AMOUNT OF PAYMENT \$410.00

Examiner

1. ☒ Applicant claims small entity status.

## FEE CALCULATION (continued)

☒ Charge any UNDERPAYMENT or credit any OVERPAYMENT in the indicated fees to Deposit Account No. 50-1442.

## 3. ADDITIONAL FEES

☐ Charge the indicated fees to Deposit Account No. 50-1442.

2. ☒ Check enclosed.

## FEE CALCULATION

### 1. BASIC FILING FEE

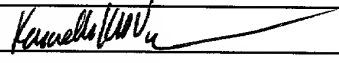
Large Entity		Small Entity		Fee Description		Fee Code		Fee (\$)		Fee Paid	
105	130	205	65	Surcharge-late filing fee or oath							
127	50	227	25	Surcharge-late provisional filing fee or cover sheet							
139	130	139	130	Non-English specification							
147	2520	147	2520	Ex parte reexam fee							
101	740	201	370	Utility filing fee						370.00	
105	330	206	165	Design filing fee							
107	510	207	255	Plant filing fee							
108	740	208	370	Reissue filing fee							
114	160	214	80	Provisional filing fee							
SUBTOTAL (1)										\$370.00	

### 2. EXTRA CLAIM FEES

tot. claims		17	-	20*	=	0	x	\$9	=	0	121	280	221	140	Request for Oral Hearing		
ind. claims		2	-	3*	=	0	x	\$42	=	0	142	1280	242	640	Utility/Reissue Issue Fee		
<input type="checkbox"/>	Multiple Dependent Claims							\$140	=		143	460	243	230	Design Issue Fee		
Large Entity		Small Entity		Fee Description							144	620	244	310	Plant Issue Fee		
Fee Code	Fee (\$)	Fee Code	Fee (\$)								122	130	122	130	Petitions to the Commissioner		
103	18	203	9	Claims in excess of 20							126	180	126	180	IDS Submission		
102	84	202	42	Independent claims in excess of 3							581	40	581	40	Assignment	40.00	
104	280	204	140	Multiple dependent claim, if not paid							179	740	279	370	For Filing RCE		
109	84	209	42	*Reissue independent claims over original patent							169	900	169	900	Expedited Design		
110	18	210	9	*Reissue claims in excess of 20 and over original patent							OTHER (indicate below)						
SUBTOTAL (2)																	

\* or number previously paid, if greater, For Reissues, see above

SUBTOTAL (3) \$40.00

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Signature		Date	October 11, 2001
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		Telephone	202-861-3900